

## **General Contractor Registration Application**

**Please read and follow these instructions.**

Your general contractor registration consists of the following forms:

1. Application Form
2. Bond Form
3. Insurance Endorsement Form
4. Authorized Agent Listing

<b><u>Application Fees:</u></b>	<b><u>New Registration</u></b>	<b><u>Renewal Registration</u></b>
<b>1 Year</b>	<b>\$150.00</b>	<b>\$120.00</b>
<b>2 Years</b>	<b>\$270.00</b>	<b>\$240.00</b>
<b>3 Years</b>	<b>\$390.00</b>	<b>\$360.00</b>

**Application Form:** Please complete the application form. Do **not** leave any spaces blank. Application **must** be signed by applicant. Application form must be **notarized**.

**Bond Form:** A minimum coverage of **\$25,000** is required. Applicants with multiple bonds (General/Demo/Sewer) must have **all** bonds begin and end on the **same** date.

**Power-of-Attorney Form:** Insurance agent **must** attach a Power-of-Attorney Form to the contractor bond(s). The sealment dates **must** be the same on the bonds **and** on the Power-of-Attorney Form.

**Certificate of Insurance:** A **minimum** coverage of **\$200,000** is required:  
**Bodily Injury:** **\$50,000 and \$100,000**  
**Property Damage:** **\$50,000**  
Insurance company NAIC number **must** be included

**The Insurance Certificate must also include:**

1. City of Cleveland **must** be "additional insured".
2. City of Cleveland **must** be "certificate holder".
3. 10 day cancellation (not 30) **must** be given.
4. The words "endeavor to" or "try to" and "but failure to mail such notice shall impose no obligation or liability upon the company, it's agents or representatives" must be **deleted**.

**Insurance Endorsement:** If your insurance agent is **not** authorized by the insurance company to delete the words in the cancellation clause, have them complete the enclosed endorsement sheet and attach it to the certificate of insurance.

**Demo contractor registration:** **1.** Copy of **Sewer Builders License** from Room 122, Division of Assessments and License.  
**2.** **Demolition Bond** from Department of Building and Housing, Room 505

**Corporations Only:** Corporations **must** provide a copy of the Articles of Incorporation with the State Seal of Ohio.

**Authorized Agents:** **Names** and **signatures** of personnel authorized to secure permits on behalf of the company **must** be provided

**Fully** complete **all** registration forms and return them to:

**City of Cleveland**  
**Dept. of Building and Housing**  
**601 Lakeside Ave. –Room #505**  
**Cleveland, OH 44114**  
**Supervisor: Patrick DiMarco**  
**216-664-2884**

***CITY OF CLEVELAND  
DEPARTMENT OF BUILDING AND HOUSING  
APPLICATION FOR CONTRACTOR REGISTRATION OR  
CERTIFICATE OF QUALIFICATION***

Registration No _____
Date: _____
Approved _____
Fee _____

DO NOT WRITE ABOVE

☐ **NEW APPLICANT**☐ **RENEWAL APPLICANT**REGISTRATION TERM ☐ 1 YEAR ☐ 2 YEARS ☐ 3 YEARS

**TO THE DIRECTOR OF BUILDING AND HOUSING:**

**IN ACCORDANCE WITH THE REQUIREMENTS OF THE CODIFIED ORDINANCES OF THE CITY OF CLEVELAND THE UNDERSIGNED DOES HEREBY MAKE APPLICATION FOR CERTIFICATE OF REGISTRATION OR QUALIFICATION FOR ONE OF THE FOLLOWING LISTED BELOW:**

**PLEASE CHECK THE TYPE OF REGISTRATION YOU ARE APPLYING FOR:**

<input type="checkbox"/> GENERAL CONTRACTOR	<input type="checkbox"/> PLUMBING CONTRACTOR	<input type="checkbox"/> 1, 2, 3 FAMILY ONLY <input type="checkbox"/> ALL WORK
<input type="checkbox"/> SEWER CONTRACTOR	<input type="checkbox"/> HVAC CONTRACTOR	<input type="checkbox"/> 1, 2, 3 FAMILY ONLY <input type="checkbox"/> ALL WORK
<input type="checkbox"/> DEMO CONTRACTOR	<input type="checkbox"/> ELECTRICAL CONTRACTOR	<input type="checkbox"/> 1, 2, 3 FAMILY ONLY <input type="checkbox"/> ALL WORK
<input type="checkbox"/> JOURNEYMAN PLUMBER	<input type="checkbox"/> ELECTRICAL MAINT TECH	
<input type="checkbox"/> FIRE PLACE INSTALLER	<input type="checkbox"/> PICTURE MACHINE OPERATOR	

**NAME OF APPLICANT:** \_\_\_\_\_ **PHONE:** (     ) \_\_\_\_\_  
                    **LAST**                    **FIRST**                    **MI**

**HOME ADDRESS:** \_\_\_\_\_ **CITY** \_\_\_\_\_ **STATE** \_\_\_\_\_ **ZIP** \_\_\_\_\_

**DATE OF BIRTH** \_\_\_\_\_ **SOC. SEC. NO.** \_\_\_\_\_

**NAME OF COMPANY:**\_\_\_\_\_ **PHONE:** (     )\_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

**EMAIL ADDRESS:** \_\_\_\_\_ **FEDERAL I.D NO.** \_\_\_\_\_

***Attach Portrait  
Photo Here***

**HAVE YOU EVER REGISTERED UNDER A DIFFERENT COMPANY NAME? YES ☐ NO ☐**  
**IF YES, WHAT WERE YOUR PREVIOUS COMPANY NAMES?**

\_\_\_\_\_

**DO YOU HAVE A CITY OF CLEVELAND LICENSE? ☐ YES OR NO ☐ IF YES, LIST PREVIOUS**  
**LICENSE NO. \_\_\_\_\_ TYPE \_\_\_\_\_**

**DO YOU HAVE A STATE LICENSE? YES ☐ OR NO ☐ IF YES, WHAT TYPE \_\_\_\_\_**  
**STATE LICENSE NO. \_\_\_\_\_ EXPIRATION DATE \_\_\_\_\_**

**OFFICERS OF COMPANY:**

<b>NAME AND TITLE</b>	<b>ADDRESS</b>	<b>CITY</b>	<b>STATE</b>	<b>ZIP</b>	<b>PHONE</b>
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

**EXPERIENCE AND TRAINING WHICH QUALIFIES YOU FOR A CERTIFICATE OF REGISTRATION  
OR QUALIFICATION ARE AS FOLLOWS (LIST TRAINING, SCHOOLING, PAST EMPLOYMENT, OR  
BUSINESS ASSOCIATES, YEARS OF ACTUAL EXPERIENCE AT TRADE, ETC) .**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**ATTACH SEPARATE SHEET IF REQUIRED**

**PLEASE ANSWER THE FOLLOWING QUESTIONS:**

**HAS YOUR CERTIFICATE OF REGISTRATION OR QUALIFICATION EVER BEEN  
SUSPENDED OR REVOKED? ☐ YES OR ☐ NO IF YES, WHEN? \_\_\_\_\_  
DATE OF REINSTATEMENT \_\_\_\_\_**

**HAVE YOU EVER BEEN CONVICTED OF VIOLATION OF THE CLEVELAND BUILDING,  
ZONING, OR HOUSING CODES? ☐ YES ☐ NO IF YES, WHEN? \_\_\_\_\_**

**HAVE YOU BEEN CONVICTED OF OR PLED GUILTY TO A MISDEMEANOR INVOLVING  
MORAL TURPITUDE OR OF ANY FELONY? ☐ YES OR ☐ NO IF YES, WHEN? \_\_\_\_\_  
WHAT COURT? \_\_\_\_\_ CASE #? \_\_\_\_\_ CHARGE? \_\_\_\_\_**

**HAVE YOU OBTAINED OR RENEWED A CERTIFICATE OF REGISTRATION OR  
QUALIFICATION BY FRAUD, MISREPRESENTATION OR DECEPTION? ☐ YES OR ☐ NO**

**HAVE YOU ENGAGED IN FRAUD, MISREPRESENTATION OR DECEPTION IN THE  
CONDUCT OF BUSINESS? ☐ YES OR ☐ NO**

**HAVE YOU BEEN CONVICTED OF REPEATED VIOLATIONS OF THE OBC OR THE  
CLEVELAND BUILDING, ZONING, OR HOUSING CODES OR OTHER LAWS OR  
ORDINANCES REGULATING BUILDING CONSTRUCTION IN THE CITY? ☐ YES OR ☐ NO  
IF YES, PROVIDE DETAILS \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_**

**IN THE PAST 12 MONTHS, HOW MANY VIOLATION NOTICES OF THE OBC, AND/OR THE  
CLEVELAND BUILDING, ZONING, OR HOUSING CODE HAVE YOU RECEIVED? \_\_\_\_\_  
HOW MANY ARE STILL NOT CORRECTED? \_\_\_\_\_**

**ARE YOU AT LEAST 18 YEARS OF AGE? ☐ YES OR ☐ NO**

**ARE YOU A UNITED STATES CITIZEN? ☐ YES OR ☐ NO**

**THE FOLLOWING NAMED AS REFERENCE ARE NOT RELATED TO ME:**

	<b>NAME</b>	<b>OCCUPATION</b>	<b>ADDRESS</b>	<b>PHONE</b>
1.	_____	_____	_____	_____
2.	_____	_____	_____	_____
3.	_____	_____	_____	_____
4.	_____	_____	_____	_____

**I DO HEREBY CERTIFY THAT I AM FAMILIAR WITH THE REQUIREMENTS OF THE BUILDING, ZONING, AND HOUSING CODES AS APPLICANT, DURING THE PAST YEAR, ALL REQUIRED PERMITS HAVE BEEN OBTAINED AND THAT ALL INSTANCES OF NON-COMPLIANCE WITH, OR VIOLATIONS OF, THE BUILDING CODES HAVE BEEN CORRECTED.**

\_\_\_\_\_  
**SIGNATURE**

\_\_\_\_\_  
County of Cuyahoga  
State of Ohio      { ss.

On this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_ personally appeared \_\_\_\_\_  
\_\_\_\_\_ to me known to be the person herein described and  
having signed the above application and on oath swears, (or affirms) that all the statements herein  
made, are true to the best of his knowledge and belief.

\_\_\_\_\_  
**NOTARY PUBLIC**

**MISREPRESENTATION OF STATEMENT OR FACT MAY BE CAUSE FOR REVOCATION OR  
SUSPENSION OF CERTIFICATE.**

# CONTRACTOR'S BOND

## CITY OF CLEVELAND

KNOW ALL MEN BY THESE PRESENTS,  
THAT \_\_\_\_\_ as principal,  
doing business as \_\_\_\_\_ Company, and  
\_\_\_\_\_ as surety are held  
and firmly bound unto the City of Cleveland or to any of its officers, for the use of any person,  
persons, firm or corporation with whom such principal shall contract to construct, alter, repair,  
add to, subtract from, reconstruct or remodel any building, structure, or appurtenance thereto or  
any part thereof, in accordance with the provisions and the requirements of the Codified Ordinances  
of the City of Cleveland, in the penal sum of Twenty-five Thousand Dollars (\$25,000), lawful  
money of the United States, for the payment of which sum well and truly to be made, we bind  
ourselves, our heirs, executors, administrators, successors and assigns, jointly and severally, firmly  
by these presents.

Sealed with our seals and dated this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

THE CONDITIONS OF THE ABOVE OBLIGATION ARE SUCH that, whereas the  
above bounden principal has made application to the Director of Building and Housing for a  
Certificate of Registration as a Contractor to engage in the business of constructing, altering,  
repairing, adding to, subtracting from, reconstructing, or remodeling any building, structure, or  
appurtenance thereto or any part thereof, as required by the Codified Ordinances of the City of  
Cleveland, during the period beginning \_\_\_\_\_, and ending the last day of  
\_\_\_\_\_.

NOW, THEREFORE, if the said principal shall well and truly indemnify, keep and save  
harmless the City of Cleveland, or any of its agents or officials for the use of any person, persons,  
firm, or corporation with whom such Contractor shall contract to do work, and shall indemnify  
and pay any such person, persons, firm or corporation for damage sustained on account of the  
failure of such Contractor to perform the work so contracted for in accordance with the provisions  
of the Codified Ordinances of the City of Cleveland, and any and all lawful rules and regulations  
promulgated under the authority thereof, and from or by reason or on account of anything done  
under and by virtue of any permits issued under such Registration for the doing of any work  
required to be done in the construction, alteration, repair, addition to, subtraction from,  
reconstruction or remodeling of any building, structure, or appurtenance thereto or any part  
thereof, then this obligation shall be null and void; otherwise, to remain in full force and effect.

THE LEGAL FORM AND CORRECTNESS  
OF THE WITHIN INSTRUMENT IS HEREBY  
APPROVED

\_\_\_\_\_  
DIRECTOR OF LAW

By \_\_\_\_\_  
ASSISTANT

Date \_\_\_\_\_

Principal \_\_\_\_\_ (Signature)

Address \_\_\_\_\_

Surety \_\_\_\_\_ (Seal)

Address \_\_\_\_\_

Attorney-in-fact \_\_\_\_\_

### CITY OF CLEVELAND - INSURANCE ENDORSEMENT

It is agreed that such insurance as is afforded under this policy for bodily injury liability and for property damage liability also applies to the City of Cleveland, Ohio, as additional insured but only with respect to accident caused by or contributed to:

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or his/her employees while performing work, other than done for the City of Cleveland, described in Division 1 (premises-operations of the item 3 of the Policy Declarations) as authorized by permit issued to:

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under the Building Code of the City of Cleveland.

It is further agreed that an employee of one of the insured's named in this policy shall not be deemed to be the employee of any other insured named with whom he/she has no contact of employment, oral or written; but the limits of liability for all insured's shall not exceed the limits set forth in the policy.

In the event of any material change in/or cancellation, lapse or non-renewal of this policy, the Company will give ten (10) days notice of such change or cancellation, lapse or non-renewal to the Building Commissioner of the City of Cleveland, Ohio.

#### Schedule:

Limits of this policy are equal to or exceed Fifty Thousand and One Hundred Thousand (\$50,000 & \$100,000) for bodily injury and Fifty Thousand (\$50,000) for property damage.

Term of Policy:    From: \_\_\_\_\_ To: \_\_\_\_\_

This endorsement forms a part of policy # \_\_\_\_\_

Agent: \_\_\_\_\_

Contractors Registration Term - From: \_\_\_\_\_ To: \_\_\_\_\_

(Notice to the City of Cleveland of termination/non-renewal is not required if the date falls after the terms of the contractor's registration period.)

Nothing herein contained shall be held up to vary, alter, waive or extend any of the terms or conditions of the policy, except as herein set forth.

Agent's Signature: \_\_\_\_\_